

BEST AVAILABLE COPY

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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TOTAL IND.	2					
TOTAL DEP.	13	↔	↔	↔	↔	
TOTAL CLAIMS	15	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.			↔					
TOTAL DEP.			↔					
TOTAL CLAIMS			[REDACTED]					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS